California WIC Program Manual

WIC 210-13

SECTION: CERTIFICATION

SUBJECT: Eligibility Requirement

ITEM: Determining Dietary Nutrition Need for All Categories

Policy

Qualified staff shall assess whether a dietary nutrition need exists at each certification using approved dietary assessment tools including responses from the nutrition questionnaires, responses from the Integrated Statewide Information System (ISIS), and self-reported information.

Required Procedures

I. The LA shall review the dietary intake and practices of women, infants, and children using the California Department of Public Health nutrition questionnaire forms referenced in WPM 210-09 or a State Agency approved nutrition questionnaire to assess nutrition need and to determine the dietary risks.

These nutrition questionnaires can be found at the CA WIC State website at <u>WIC Forms</u>.

- II. Nutrition needs shall be determined by reviewing the dietary intake and feeding patterns of the participant as determined by responses to ISIS questions, and questions asked during individual counseling as part of the certification process.
- III. All women, infants (4 months of age or older), and children being certified require a dietary risk code. It is important to note that even if an A, B, C and/or N code(s) have been identified, a dietary risk code is still required for certification.
- IV. If a dietary need is not identified after performing a nutrition assessment described above, Job Aid 960-02 or 960-03 may be used to conduct a more thorough assessment and to see if a dietary risk code for Inappropriate Nutrition Practices is applicable.

V. If a dietary need is not identified after performing a nutrition assessment described

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above and the required blood work is present, the following presumptive risk codes (dietary codes of last resort) shall be used:

- A. D428 for infants (4 months or older) and children up to two years of age.
- B. D401 for children 2 years or older and women.
- VI. Presumptive risk codes, codes of last resort (D401 or D428), may **not** be used for eligibility purposes if hemoglobin or hematocrit test results are not documented in the ISIS lab results record. (Refer to Job Aid 960-01)
 - A. Unless other qualifying D-codes are identified, staff are required to suspend the certification until blood work is brought in.
 - B. When a certification is suspended, staff may issue one month FIs only if the participant is still within the <u>previous</u> certification period.
 - C. Once blood work is brought in, staff may complete the certification. However, Fls may not be retroactively issued.
- VII. The LA shall document identified dietary risks in ISIS on the Summary screen of the individual's record.

Exception

Infants enrolled up to 4 months of age do not require a dietary risk code.

Authority

7 CFR 246.7 (e)

USDA Policy Memorandum 98-9, Revisions 1, 8, and 10: Nutrition Risk Criteria. Value Enhanced Nutrition Assessment (VENA)

Resources

Job Aid 960-01: Certification Requirements Based on Dietary Assessment and

Presence of Hematological Test Results

<u>Job Aid 960-02</u>: *Dietary Nutrition Risk Criteria* Job Aid 960-03: *Dietary Code Questions*

Dietary Risk Criteria table begins on next page.

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The table below includes the dietary risk criteria to assess nutritional needs of all categories of WIC participants. The priority levels are indicated for each risk and category. The ISIS code number (in bold) and corresponding USDA risk code (in parenthesis) is provided in the far left column for reference.

ISIS	INDICATOR OF NUTRITIONAL NEED DEFINITION	<u>PRIORITIES</u>					
CODE (USDA CODE)		PREGNANT WOMEN	BREASTFEEDING WOMEN	NONBREAST- FEEDING WOMEN	INFANTS	CHILDREN	
D401	Dietary Guidelines Not Met:	IV	IV	VI		V	
(401)	Women and children ≥ 2 years of age for whom a complete nutrition assessment has been performed and no other dietary risk(s) (including D402, D421, D423, D425, and D427) are identified. The hemoglobin/hematocrit must be current in the ISIS record in order to assign this risk.					≥ 2 years	
D402	Vegan or Highly Restrictive Diets:	IV	IV	VI	IV	V	
(401, 427)	Women: Consuming a diet very low in calories and/or essential nutrients; or impaired caloric intake or absorption of essential nutrients following bariatric surgery. Infants and children: Routinely faceling a diet very low in calories.						
	feeding a diet very low in calories and/or essential nutrients.						
D411	Inappropriate Nutrition Practices				IV		

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ISIS CODE		<u>PRIORITIES</u>					
(USDA CODE)	INDICATOR OF NUTRITIONAL NEED DEFINITION	PREGNANT WOMEN	BREASTFEEDING WOMEN	NONBREAST- FEEDING WOMEN	INFANTS	CHILDREN	
(411)	for Infants:						
	 Using a substitute for human milk or for FDA approved iron- fortified formula as the primary nutrient source during the first year of life (e.g., feeding cow's milk < 1 year). 						
	 Using nursing bottles or cups improperly. 						
	 Offering complementary foods (any foods or beverages other than human milk or formula) or other substances that are inappropriate in type or timing. 						
	 Using feeding practices that disregard the developmental needs or stage of the infant. 						
D411	 Feeding inappropriately diluted formula. 				IV		
(Cont'd.)	Limiting the frequency of nursing the exclusively breastfed infant when human milk is the sole source of nutrients.						

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ISIS		<u>PRIORITIES</u>					
CODE (USDA CODE)	INDICATOR OF NUTRITIONAL NEED DEFINITION	PREGNANT WOMEN	BREASTFEEDING WOMEN	NONBREAST- FEEDING WOMEN	INFANTS	CHILDREN	
	 Feeding a diet very low in calories and/or essential nutrients (e.g., vegan diet, macrobiotic diet). Using inappropriate sanitation in preparation, handling, and storage of expressed human milk or formula. Not providing dietary supplements recognized as essential by national public health policy when diet alone cannot meet nutrient requirements. Feeding foods that could be contaminated with harmful microorganisms or toxins. Feeding dietary supplements with potentially harmful consequences. 						
D421 (411,	Pica: Current or recent craving for or ingestion of nonfood items may	IV	IV	VI		V	

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ISIS CODE	I N N	<u>Priorities</u>					
(USDA CODE)	INDICATOR OF NUTRITIONAL NEED DEFINITION	PREGNANT WOMEN	BREASTFEEDING WOMEN	NONBREAST- FEEDING WOMEN	INFANTS	CHILDREN	
425, 427)	include: • Dirt • Clay • Ice • Starch (laundry or corn) • Cigarette butts • Ashes • Paint chips • Baking soda						
D423 (427)	Inappropriate of Excessive Intake of Dietary Supplements: including single or multivitamins, minerals and herbal or botanical supplements/remedies/teas	IV	IV	VI	IV	V	
D425 (425) D425 (Cont'd.)	 Inappropriate Nutrition Practices for Children: Feeding inappropriate beverages as the primary milk source. Feeding any sugar containing fluids. Using baby bottles, cups or pacifiers improperly. 					V	

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ISIS	INDICATOR OF NUTRITIONAL NEED DEFINITION	<u>Priorities</u>					
CODE (USDA CODE)		PREGNANT WOMEN	BREASTFEEDING WOMEN	NONBREAST- FEEDING WOMEN	INFANTS	CHILDREN	
	 Using feeding practices that disregard the developmental needs or stage of the child. 						
	 Not providing dietary supplements recognized as essential by national public health policy when diet alone cannot meet nutrient requirements. 						
	 Ingestion of nonfood items (pica). 						
	 Feeding foods that could be contaminated with harmful microorganisms. 						
	 Feeding dietary supplements with potentially harmful consequences. 						

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ISIS CODE (USDA CODE)	INDICATOR OF NUTRITIONAL NEED DEFINITION	<u>PRIORITIES</u>					
		PREGNANT WOMEN	BREASTFEEDING WOMEN	NONBREAST- FEEDING WOMEN	INFANTS	CHILDREN	
D427 (427)	Inappropriate Nutrition Practices for Women:	IV	IV	VI			
	 Inadequate vitamin/mineral supplementation recognized as essential by national public health policy. 						
	 Pregnant women ingesting foods that could be contaminated with pathogenic microorganisms. 						
D428 (428)	Dietary Risk Associated with Complementary Feeding Practices: Infants and children for whom a complete nutrition assessment has been performed and no other risk(s) (including D402, D411, D421, D423, and D425) are identified. The hemoglobin/hematocrit test must be current in the ISIS record in order to assign this risk.				IV (4 to 12 months)	V (12 to 23 months)	

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